



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
[www.uspto.gov](http://www.uspto.gov)



CONFIRMATION NO. 4193

Bib Data Sheet

|                             |  |              |                        |   |
|-----------------------------|--|--------------|------------------------|---|
| SERIAL NUMBER<br>09/925,265 | FILING OR 371(c)<br>DATE<br>08/09/2001<br>RULE | CLASS<br>707 | GROUP ART UNIT<br>2162 | ATTORNEY<br>DOCKET NO.<br>AUS920010557US1 |
|-----------------------------|--|--------------|------------------------|---|

**APPLICANTS**

Benjamin Andrew Himmel, Yorktown Heights, NY;  
 Maria Azua Himmel, Yorktown Heights, NY;  
 Herman Rodriguez, Austin, TX;  
 Newton James Smith JR., Austin, TX;  
 Clifford Jay Spinac, Austin, TX;

**\*\* CONTINUING DATA \*\*\*\*\*****\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 09/14/2001

|                                 |   |                        |                     |                    |                         |
|---------------------------------|---|------------------------|---------------------|--------------------|-------------------------|
| Foreign Priority claimed        | <input type="checkbox"/> yes <input type="checkbox"/> no  | STATE OR COUNTRY<br>NY | SHEETS DRAWING<br>9 | TOTAL CLAIMS<br>24 | INDEPENDENT CLAIMS<br>3 |
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                        |                     |                    |                         |
| Verified and Acknowledged       | Examiner's Signature _____ Initials _____   |                        |                     |                    |                         |

**ADDRESS**

32329

**TITLE**

SMART RECEIPT

|                             |   |   |
|-----------------------------|---|---|
| FILING FEE RECEIVED<br>1082 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
|-----------------------------|---|---|